OAHU CANDIDATES-SHBMIT 1'ORIGINAL AND 1 COPY

Candidate Signature

NEIGHBOR ISLAND CANDIDATES-SUBMIT 1 ORIGINAL AND 2 COPIES





## DISCLOSURE REPORT CANDIDATE COMMITTEE

PLEASE TYPE OR PRINT CLEARLY WITH INK (INSTRUCTIONS FOR COMPLETING THE DISCLOSURE REPORT CAN BE FOUND IN THE "GUIDEBOOK FOR CANDIDATE COMMITTEES." SECTION I-CANDIDATE AND CANDIDATE COMMITTEE: SECTION II-TYPE OF REPORT: (a) Candidate Name: (See the Schedule of Reporting Dates to complete this section) CAMPAIGH S 1st Preliminary Rightry (S) Scott Saiki Third Amended (b) Committee Name: 2nd Preliminary Primary Short Form Scott Saiki JAN 30 Final Primary (c) Mailing Address: P.O. Box 12022 Preliminary General C REPORTING PERIOD Honolulu, HI 96828-1022 (d) Phone (Bus) (808) 261-2402 (808)527-2222Final Election Period 11-08-00 through 12-31-00 Treasurer's Supplemental SECTION III-SUMMARY OF RECEIPTS AND DISBURSEMENTS (Complete Section IV on the Back of this Form Before Completing This Section) COLUMN A COLUMN B **ELECTION PERIOD**<sup>2</sup> **TOTAL THIS PERIOD** TOTAL TO DATE Cash on Hand at the Beginning of the Election Period.... 1461.22 Cash on Hand at the Beginning of this Reporting Period..... 1461.22 106.07 106.07 Total Receipts (From Line 15)..... Subtotal (Add Lines 2 and 3 for Column A and Lines 1 and 3 for Column 8)............. 1567.29 1567,29 Total Disbursements (not including Unpaid Expenditures) (From Line 19)..... 55.00 55.00 1512.29 6. Cash on Hand at the Closing of this Reporting Period (Subtract Line 5 from Line 4).... 1512.29 0.00 7. Total Loans at the Closing of this Reporting Period..... 0.00 8. Total Unpaid Expenditures at the Closing of this Reporting Period..... 0.00 Debts Owed at the Closing of this Reporting Period (Add Lines 7 and 8)...... 10. Surplus/Deficit (Subtract Line 9 from Line 6)..... 1512.29 I hereby certify that the information on this report and all attached Schedules are true, correct and complete to the best of my knowledge. Aus K. Dun 1-30-01 1-30-01

Short Form is checked if the candidate is filling a Preliminary, Final or Supplemental Report and has aggregate contributions and aggregate expenditures for the reporting period totaling \$2,000 or less.

Short form reporting requires completion of only Section II, and Section III of this Disclosure Report.

An Election Period is the two-year period between general election days if a candidate is seeking nomination or election to a two-year office and the four-year period between general election days if a candidate is seeking nomination or election to a four-year office.

RECEIPTS

COLUMN A

COLUMN 8 ELECTION PERIOD TOTAL TO DATE

TOTAL THIS PERIOD

11. Contributions From:	11
{al Individuals/Other Sntitles/Noncandidate Committees/Political Parties	11100
(i) Monetary and Non-Monetary Contributions of \$100 or Less	11tm/
(iii) Monetary and Non-Monetary Contributions of More Than \$100	11 (a)(i
(fiii) Subtotal (Add Lines 11(a)(ii) and 11(a)(iii)). 100.00 100.00	† 1 fastii
(b) Candidate or Candidate's Immediate Family	11(b)
(i) Monetary and Non-Monetary Contributions of \$100 or Less	11660
(ii) Monetary and Non-Monetary Contributions of More Than \$100	11(6)(6)
(iii) Subtotal (Add Lines 11/b)(i) and 11(b)(iii)	11(6)(60
12. Total Contributions (Add Lines 11(a)(iii) and 11(b)(iii)	12
13. Public Funds and Other Receipts	13
14. Loans	14
15. Total Receipts (Add Lines 12 through 14)	15
DISBURSEMENTS	
16. Expenditures	16
17. Loans Repaid or Forgiven	17
18. Unpaid Expenditures Paid or Forgiven	18
19. Subtotal Disbursements (Add Lines 16 through 18)	19
20. Unpaid Expenditures.	20
21. Total Disbursements (Add Lines 19 and 20)	21

CHECK UNLY ONE BOX	ı	CITATO
USE SEPARATE SCHEDULE(S) FOR EACH CATEGORY BELOW		STAT
		# 1 ham 4 sept 6 mg

DINDIVIOUALS/OTHER ENTITIES/NONCANDIDATE
COMMITTEES/POLITICAL PARTIES



### STATE OF HAWAII CAMPAIGN SPENDING COMMISSION



# SCHEDULE A MONETARY AND NON-MONETARY CONTRIBUTIONS CANDIDATE COMMITTEE

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME:

CANDIDATE A	AD CHILDIDALE COMMITTEE HAME.	PAGE	1 OF	1
DATE OF DEPOSIT OR	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF DONOR	FOR AGGREGATES OF \$1,000 OR MORE NAME OF EMPLOYER	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE	
RECEIPT OF NON-MONETARY CONTRIBUTION	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION	OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
10/23/00	Non-Monetary contribution Anheuser-Busch Co., Inc. 99-877 Iwaena Aiea, HI 96701		100.00	100.00
	NON-MONETARY CONTRIBUTION			
	NON-MONETARY CONTRIBUTION			
	NON-MONETARY CONTRIBUTION			
	NON-MONETARY CONTRIBUTION			
<u></u>	NON-MONETARY CONTRIBUTION			
:				
1. SUBTOTAL (	DF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS	5 PERIOD (This Page)	100.00	
2. TOTAL MON	ETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD • Line Number of the Disclosure Report - 11(a)(ii) or 11(b)(ii))	D (Last Page Only) (Transfer total	100.00	
			Form	CC-5(A) (Dev. 5/00)

roim co-stay (act. 3/99)

With the exception of loans and unpaid expenditures that are forgiven, non-monetary contributions must also be reported as an "Expenditure" on Schedule 8.

### STATE OF HAWAII CAMPAIGN SPENDING CONDUSSION

#### SCHEDULE B EXPENDITURES CANDIDATE COMMITTEE

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AI	O CANDIDATE COMMITTEE NAME:	PAGE 1 OF	1
OATE OF EXPENDITURE	FULL NAME, SYREET ADDRESS, CITY, STATE AND ZIPCODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF MON-MONETARY CONTRIBUTION	AMOUNT OF EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
12/27/00	Temari 1329 A 10th Avenue Honolulu, HI 96816	Kadomatsu for Senior Center	\$40.00
11/23/00	NON-MONETARY CONTRIBUTION  Heather Bolan  719 12th Avenue  Honolulu, HI 96816	Split cost for Kadomatsu for Kapahulu Center	\$15.00
	NON-MONETARY CONTRIBUTION		
	HON-MONETARY CONTRIBUTION		
	NON-MONETARY CONTRIBUTION		
	NON-MONETARY CONTRIBUTION		
	NON-MONETARY CONTRIBUTION		
1. SUBTOTAL OF	EXPENDITURES THIS PERIOD (This Page)		55.00
2. TOTAL EXPEN	DITURES THIS PERIOD (Last Page Only) (Transfer total to Line Numb		55.00
		For	m CC-5(B) (Rev. 5/99)

#### STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

# SCHEDULE C PUBLIC FUNDS AND OTHER RECEIPTS CANDIDATE COMMITTEE

NO INFORMATION OF COPIES FROM THE REPORTS SHALL BE SOLD OF USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OF FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AF	ID CANDIDATE COMMITTEE NAME:	PAGE	1 <b>OF</b>	1
DATE OF DEPOSIT	Full name, street address, city, state and zipcode of source of public funds or other receipt	DESCRIPTION OF OTHER RECEIPT	AMOUNT OF PUBLIC FUNDS OR OTHER RECEIPT THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	First Hawaiian Bank P.O. Box 1959 Honolulu, Hawaii 96805-1959	November Interest	4.53	4.53
	First Hawaiian Bank P.O. Box 1959 Honolulu, Hawaii 96805-1959	December Interest	1.54	6.07
_				
1. SUBTOTAL OF PUBLIC FUNDS AND OTHER RECEIPTS THIS PERIOD (This Page)			6.07	
Z. TOTAL PUBLIC	FUNDS AND OTHER RECEIPTS THIS PERIOD (Last Page Only	v) (Transfer total to Line Number	6.07	
		***************************************	<u> </u>	:C- 5(C) (Rev. 5/99)